

STATE OF RHODE ISLAND
County of _____
Estate of _____
Alias _____
Alias _____

PROBATE COURT OF THE _____

No. _____
Date _____

UNIVERSAL APPOINTMENT BOND

We, the undersigned, as Principal(s):

_____ Name	_____ Name
_____ No. Street	_____ No. Street
_____ City/Town State Zip Phone Number	_____ City/Town State Zip Phone Number

and as Surety(ies):

_____ Name	_____ Name
_____ No. Street	_____ No. Street
_____ City/Town State Zip Phone Number	_____ City/Town State Zip Phone Number

are holden and stand firmly bounden and obliged unto said Court in the full sum of \$_____ to be paid thereto; to the true payment whereof we bind ourselves, our successors, heirs, executors and administrators jointly and severally firmly by these presents.

Sealed with our seals. _____
Date of execution

THE CONDITION OF THIS OBLIGATION IS SUCH, that if the above bounden principal the duty appointed
[] Executor [] Administrator [] Guardian [] Other _____
(check one)

shall faithfully perform his/her duties according to law as such fiduciary, then this obligation to be void, otherwise to remain in full force and effect.

Signed in the presence of:

_____ Witness	_____ Signature of Fiduciary
_____ Witness	_____ Signature of Fiduciary
_____ Witness	_____ Signature of Surety (if required)
_____ Witness	_____ Signature of Surety (if required)